



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 4452

| SERIAL NUMBER | FILING or 371(c)<br>DATE<br>RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET<br>NO. |
|---------------|----------------------------------|-------|----------------|------------------------|
| 10/743,269    |                                  | 536   | 1623           | 033972.549252          |

## APPLICANTS

Kurt Nilsson, Lund, SWEDEN;

## \*\* CONTINUING DATA \*\*\*\*

This application is a CIP of 09/722,241 11/27/2000 PAT 6,686,457

which is a CIP of 09/091,486 06/19/1998 PAT 6,444,655 \*

(\*)Data provided by applicant is not consistent with PTO records.

## \*\* FOREIGN APPLICATIONS \*\*\*\*

SWEDEN 0002462.0 06/28/2000

SWEDEN 0000430.9 04/06/2000

SWEDEN 0004343.0 11/24/2000

## \*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*\* SMALL ENTITY \*\*

03/22/2004

|                           |   |                                |   |                  |                 |              |                    |
|---------------------------|---|--------------------------------|---|------------------|-----------------|--------------|--------------------|
| Foreign Priority claimed  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 35 USC 119(a-d) conditions met | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| Verified and Acknowledged | /MICHAEL C HENRY/<br>Examiner's Signature                           | Initials                       |   | SWEDEN           | 0               | 9            | 2                  |

## ADDRESS

SMITH, GAMBRELL & RUSSELL  
 SUITE 3100, PROMENADE II  
 1230 PEACHTREE STREET, N.E.  
 ATLANTA, GA 30309-3592  
 UNITED STATES

## TITLE

Filtration material

|                            |   |  |
|----------------------------|---|--|
| FILING FEE RECEIVED<br>710 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                            |
|                            |   | <input type="checkbox"/> 1.16 Fees (Filing)                  |
|                            |   | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
|                            |   | <input type="checkbox"/> 1.18 Fees (Issue)                   |
|                            |   | <input type="checkbox"/> Other _____                         |
|                            |   | <input type="checkbox"/> Credit                              |